- Investigation Would Ensure VA Not Substituting Adjustment Disorder for PTSD - Was hington, DC

– U.S. Rep. John Hall (D-NY19), Chairman of the House Veterans Affairs Subcommittee on Disability Assistance and Memorial Affairs, today called for a full and exhaustive federal investigation into recent reports that the Department of Veterans Affairs (VA) is misdiagnosing PTSD as "Adjustment Disorder" in order to save money.

"The possibility that VA employees would intentionally misdiagnose PTSD or any other condition for budgetary reason and prioritize bureaucratic, cost-cutting measures over veteran care is deeply disturbing," said Congressman Hall.

Last month a VA psychologist at the Temple, Texas, VA Medical Center circulated an e-mail suggesting that, in order to save money, diagnoses of PTSD should be avoided by substituting diagnoses of 'adjustment disorder' in their place.

"In order to ensure that our veterans are receiving the care that they have earned, I urge you to conduct a full investigation to ensure that there is no culture of directed diagnoses within the VA," Hall wrote in a letter to VA Secretary James Peake. "As Chairman of the Subcommittee that oversees the care of our veterans, particularly those returning with PTSD, I believe that a thorough investigation into this incident will enable the VA to reaffirm to returning veterans that they will receive quality care, and ensure that the VA is meeting its full healthcare mission. It is imperative that the VA err on the side of presuming that those who have been exposed to the horrors of war may in fact be marked by this experience, and do everything and anything they can to repair these wounds. The cost we ask our soldiers to pay to secure and spread our freedom is beyond repayment, and demands nothing less than our full commitment and care."

Returning veterans are facing increasingly difficult transitions from military to civilian life. A recent RAND study reported that approximately 30% of returning veterans are showing symptoms of PTSD, the highest percentage reported in history.

"These veterans need as much assistance and outreach as possible, and the prevalence of an internal email intending to downplay an already stigmatized disorder in order to save money is deplorable," said Hall. "The VA has an obligation to take the effects of combat trauma seriously. The message expressed in the email by the Program Coordinator for the PTSD Clinical Care Team at the Temple VAMC is in direct conflict with the VA mission, its moral obligation, and the service we all owe to the heroes of this nation who sacrificed mind, body, and family to protect this great country."

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